## Vanderburgh County Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>09/12/2010</u>	Address:	4600 Blk Harmony Rd
Case #:	<u>10-65</u> 5 <u>76</u>		Evansville, IN
County:	_Vanderburgh		47 <u>712</u>
	<del>-</del>		±1 <u>712</u>
Type of La	boratory Seizure (check one)	Scizure Location (	check all that apply)
<ul> <li>☑ Operational Lab</li> <li>☐ Chemical/Glassware/Equipment (only)</li> <li>☐ Dumpsite (only)</li> </ul>		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
(check all th:	<u>id: Location (bedroom, kitchen, open si</u> at apply) /Ammonia Reaction(s): <u>Trunk of vel</u>		
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: Trunk of vehicle			
☐ Water Reactive Metal (Lithium):			
Hydrochloric Acid Gas Generator(s):			
Anhydrous Ammonia:			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes ☐ No ☐ Children Living condi Estimated ler	rage 18 discovered (check appropriate(number present)  not present but evidence they reside a tions of home: clean disarray ngth of time manufacturing had been aformation:	or visit often	
<u> Fhis report l</u>	has been faxed to the following age	ncies that serve the l	ocation:
Fire Departm	eut: C Weaver	l/ax: <u>812</u> -43	
Health Depar Depuitment ::	tment: <u>D Caldwell</u>	Fax: <u>812-49</u>	
Берапидені (	of Child Services:	Fax;	
For further information regarding this methamphetamine laboratory, contact investigating Officer: <u>Det. Heath Stewart</u> Phone <u>81</u> 2 <u>-435-8518</u>			

This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.